

Delaware Head Start

State Collaboration Office



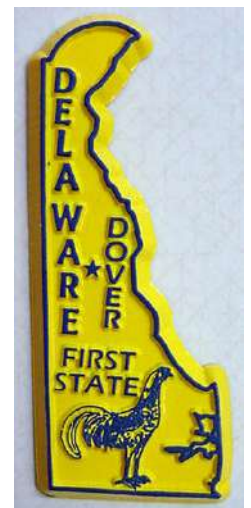
Needs Assessment

2009

Prepared for the Delaware Department of Education

By:
Jim Salt, Ph.D.
Center for Disabilities Studies
University of Delaware

August 2009





Head Start Collaboration Office
Delaware Department of Education,
Office of Early Childhood
Townsend Building
401 Federal Street, Suite #2
Dover, DE 19901
302-735-4210

www.doe.k12.de.us/infosuites/students_family/hs/about.shtml



Center for Disabilities Studies
University of Delaware
461 Wyoming Road • Newark, DE 19716
(302) 831-6974 • (302) 831-4689 TDD
www.udel.edu/cds

Acknowledgements

Effective collaboration is critical to the success of early childhood education programs, especially those that reach underserved families and children. It takes many, diverse hands working together to provide a quality set of services and supports families and children need.

The same could be said for the needs assessment and this report. This report and the data collection and analysis underlying it reflect the efforts of many individuals who completed the needs assessment survey, provided or located supporting information, compiled the information included in this report, and reviewed drafts of this document as it evolved.

I would first like to thank Betty Richardson, who retired as Director of the Head Start Collaboration Office in December 2008. Her commitment to remain involved after her retirement, in the absence of a new Director, was critical to the success of this assessment. I would also like to thank Connie Moran, Director of the state Early Childhood Assistance Program, who helped keep the assessment process moving forward after Betty's retirement (even though she was already wearing more than one hat). Betty's and Connie's expertise and insights were invaluable in sifting through and making sense of the immense amount of information gathered as part of the assessment.

I would also like to express appreciation to the Directors the Head Start/Early Head Start programs and Early Childhood Assistance Programs and their staff members for participating in the various stages of the assessment process. The assessment would have not succeeded without their willingness to complete the lengthy needs survey, provide feedback about the initial results, and contribute to the shaping the needs assessment process.

Finally, many thanks go to the variety of students and staff at the Center for Disabilities Studies (Debbie Amsden, Blake Bossert, Christina DePalma, Moneick Hancock, Amanda Knox, Colleen O'Connor, Nicole Sampson, and Brendan Sullivan). They provided vital assistance with collecting and entering the survey data, conducting analyses, creating tables, contributing to the report, and providing the general support needed to bring the report to completion. Without their help the assessment and report could not have been successfully accomplished.

Acronym Glossary

CDS	Center for Disabilities Studies
CHIP	Children's Health Insurance Program
DDOE	Delaware Department of Education
ECAP	Early Childhood Assistance Program
HS/EHS	Head Start/Early Head Start
HSCO	Head Start Collaboration Office
IEP	Individualized Education Plan
IFSP	Individualized Family Service Plan
IRMC	Interagency Resource Management Committee
LEA	Local Education Agency
OCCL	Office of Child Care Licensing
OSEP	Office of Special Education Programs
PIR	Program Information Reporting
TANF	Temporary Assistance for Needy Families

Table of Tables

Table Number	Title	Page
Table 1	Education of Employees by Type of Facility	4
Table 2	Brief Descriptions of Head Start/Early Head Start Programs and ECAPs	7
Table 3	Head Start and Early Head Start – 2007-2008 State-wide Enrollment Information	8
Table 4	Head Start and Early Head Start–Characteristics of Children Enrolled, 2007-2008	9
Table 5	Early Childhood Assistance Programs – 2007-2008 State-wide Enrollment Information	10
Table 6	Early Childhood Assistance Programs –Characteristics of Children Enrolled, 2007-2008	11
Table 7	Summary of Key Findings	16
Table 8	Alignment of Goals and Objectives of <i>The Creative Curriculum Developmental Continuum for Ages 3-5</i> with the Delaware <i>Early Learning Foundations for School Success</i> .	31

Table of Contents

Executive Summaryi

Introduction and Overview of Report.....1

Section 1: Profile of Delaware and its Early Care and Education Environment.....1

 Overview of Delaware.....1

 Delaware’s Early Childhood Population.....2

 Profile of Services for Preschool-aged Children in Delaware.....3

 Context of Delaware’s Early Care and Education System.....4

Section 2: Profiles of Head Start/Early Head Start Programs & Early Childhood Assistance Programs (ECAPs).....5

 Overview of Head Start/Early Head Start Programs and ECAPs.....5

Section 3: Needs Assessment Methodology and Findings.....12

 Needs Assessment Methodology.....12

 Key Findings of the Needs Assessment.....14

 Global Strengths and Needs.....14

 Needs and Strengths By Priority Area.....15

 Findings in Support of the Needs and Strengths Determinations.....20

Conclusions.....33

References.....34

Executive Summary

In the Fall of 2008, the Delaware Head Start Collaboration Office, located at the Delaware Department of Education, contracted with the University of Delaware to conduct an assessment of the collaboration needs of Delaware's 13 Head Start/Early Head Start programs and Early Childhood Assistance Programs (ECAPs). This assessment was required by the federal Head Start Act, as amended in December 2007. Delaware elected to include the ECAPs in the assessment for two reasons: 1) the state's small size, with a network of providers and technical assistance organizations that is more interconnected than in larger states; and 2) because ECAPs are mandated under state law to follow the Head Start Performance Standards.

The needs assessment involved several methods and examined a number of priority areas identified by the Head Start Act. First, programs were asked to complete a survey designed by a national committee of state Collaboration Office Directors representing each region. This survey examined programs' strengths and needs related to collaboration. Second, program information and key reports relevant to the 13 Delaware programs were reviewed. Finally, expert feedback was sought to interpret the information gained from the first two sources and to identify additional needs and strengths. The Head Start Outcomes Framework was used as a foundation during the planning process for Delaware needs assessment.

The key findings of this assessment, presented by priority area, are as follows:

Global Strengths and Needs

The changes in the revised Head Start Act reflect small changes in program requirements and collaboration expectations in most priority areas. However, some priority areas include substantial changes that have major impacts that programs still need to navigate. It is not surprising then, that identified needs outweigh strengths at both global and priority area levels. The should not be seen as reflection of program quality, but rather a reflection of the fact that programs, as well as the state Head Start Collaboration and ECAP offices, are still in the process of responding to the changes in the Head Start Act.

Global Strengths:

- Both Head Start/Early Head Start (HS/EHS) programs and Early Childhood Assistance Programs (ECAPs) appear to be resourceful in meeting the needs of families and children and are committed to the spirit of local and state collaboration. Lack of time and resources often limit programs' abilities to collaborate, particularly at the state level.
- These strengths are reflected in how well programs perform on monitoring visits, in child outcomes, and in programs' abilities to make linkages to connect families with key resources and referrals to support families and meet their needs, even though formal collaboration agreements may not always be in place.

Global Needs:

- The major need that cuts across a number of priority areas (e.g., Homelessness Services, Child Care, Welfare/Child Welfare, Community Services, Partnering with Local Education Agencies) relates to meeting the new full day/full year service definitions in the revised Head Start Act. The expansion of full day from 6 to 8 hours to over 8 hours means that:

- Programs will need to gather new information about the number of families in need of full-day/full-year services.
- The array of program options and services will need to be reviewed to identify possible enhancements to meet the extended definition and possible increased need.
- Existing partnerships may need to be enhanced, or new ones developed, to meet program service gaps related to child care, community services, and a variety of other areas.
- Another need that crosses priority areas relates to outreach to other agencies around conducting professional development for program staff. Programs may benefit from help other agencies in the community could provide around three areas:
 - Understanding the available services offered by these agencies;
 - Strategies these agencies use to provide for the needs of families;
 - How HS/EHS programs and ECAPs can most appropriately/effectively meet the needs of the families they serve.

Needs and Strengths By Priority Area

Health Care: Needs: Family representation on program Health Advisory Committees and helping families get transportation to appointments are the areas programs identified as the most important issues. Programs might also benefit from assistance related to immunizations, linking children to dental homes, and helping undocumented families access health services (and likely other community services as well).

Services for Children Experiencing Homelessness: Needs: Given the introduction of McKinney-Vento homelessness services requirements in the revised Head Start Act, programs appear to need assistance regarding:

- Locating and/or accessing data about the needs of homeless children and families.
- Increasing enrollment levels of homeless children and families to meet increased expectations under the revised Head Start Act.
- Developing relationships with agencies and organizations that serve families and children who are homeless or address homelessness issues at community level, including developing closer relationships with McKinney –Vento liaisons in local school districts.

Strengths: A strength of HS/EHS programs and ECAPs in this area is their willingness to align policies, procedures, and programming to meet the McKinney-Vento requirements.

Welfare/Child Welfare: Needs: Given the higher expectations in the Head Start Act related to welfare/child welfare, the number of families that would potentially benefit from a variety of welfare/child welfare services, and programs' reported low levels of collaboration with welfare/child welfare agencies, there may be need for support around relationship development in this area. Support for families moving into employment, experiencing domestic violence, and foster care and adoptive families may be particular areas of focus. Also, more data are needed on different populations (e.g., number of foster families) to better understand the level of need in program service areas.

Child Care: Needs: Needs in this area center around the challenge of meeting the new full day/full year requirements in the revised Head Start Act. Almost all of these are captured in the global needs section. Additional needs include:

- Aligning policies and practices with other service providers.
- Developing ways of effectively sharing information about children who are served by more than one agency.

Strengths: The extent of relationships with child care providers appears to be a strength in this area. These relationships will be important assets as programs work to meet the new full day/full year requirements.

Family Literacy Services: Needs: The primary need for this priority area appears to be for assistance around helping programs understand and access resources related to family literacy and library programs.

Services for Children with Disabilities: Needs: There are several needs in this priority area as a result of changes to the Head Start Act:

- Programs would benefit from developing or enhancing collaborative recruitment efforts with agencies serving children with disabilities and may need support in this area.
- Programs might benefit from assistance related to developing effective procedures for providing early intervening services to children with disabilities prior to eligibility determinations by appropriate agencies.
- At the systems level, there also appears to be a need for assistance to facilitate quicker responses to program referrals for evaluation.

Strengths: The majority of programs have local agreements with Local Education Agencies or Part C providers to coordinate services for children with disabilities.

Community Services Needs: There are two needs specific to this priority area:

- Programs may need support to enhance relations with other community organizations in order to strengthen support for families.
- Programs may benefit from support that would help them maximize the use of community organizations and businesses as sources of in-kind resources and volunteers.

Partnering with Local School Districts for Head Start Transition and Alignment with K-12: Needs: The higher expectations for transition in the revised Head Start Act create several needs for programs:

- All programs have transition processes, but these are not as formal and data driven as needed under the revised requirements.
- Transition processes also are not at a stage that promotes the expected level of alignment between preschool and kindergarten.
- Specific state-level efforts may be needed to strengthen relationships between programs and local school districts and to enhance transition procedures to meet the new requirements.

Professional Development: Needs: There are several needs related to the new professional development requirements:

- To meet the new Bachelor's degree requirements for teachers, programs will need to work on strengthening relationships with 4-year colleges. An important aspect of this work will be developing/creating access to necessary degree programs that can be completed outside of the regular work day (e.g., evening and on-line courses, self-paced content).
- More program teachers will need to take advantage of these 4-year programs to meet the new requirements of the Head Start Act.
- More Assistant Teachers will also need to pursue relevant programs leading to required credentials.
- Programs will also need to enhance outreach to community organizations to provide professional development opportunities for support staff who work with families, and staff will need to pursue these opportunities.
- The Head Start Collaboration and ECAP offices need to work to coordinate the efforts of the state Head Start Training and Technical Assistance office and the Delaware Institute for Excellence in Early Childhood to efficiently provide professional development programming that meets the needs of programs and staff.

Strengths: There are also several strengths in this area:

- Programs have good relationships with 2 year community colleges. These relationships have helped programs meet educational and professional development requirements under the previous version of the Head Start Act.
- Programs appear resourceful in securing community resources to provide for professional development activities.
- Two important new system-level strengths have recently emerged that show great promise in delivering quality professional development opportunities to the entire state early care and education community:
 - The state-based training and technical assistance system for Head/Early Head Start programs developed early in 2008.
 - The Delaware Institute for Excellence in Early Childhood developed in late 2008. The Institute brings together myriad resources related to professional development for the early care and education community and is designed to provide a comprehensive and coordinated approach to early childhood professional development in Delaware and build a system of connected technical assistance to providers.

Other Assessment Topics

Alignment of Program Curricula with State Standards and Outcomes: Needs: The primary need in this area is for curriculum mapping work for program curricula for children ages 0-3 years.

Strengths: Extensive curricula mapping that has been done to date for the curriculum for children ages 4-5 years is a definite strength. Also, the state's commitment to assessing outcomes and its decision to apply the same curricula and outcomes standards to both HS/EHS programs and ECAPs are positives as well.

Migrant Population and Services: Needs: With the decision by Telamon to relinquish the Migrant Head Start grant, the major need in this area is to find an effective way to meet the needs of migrant families and children who been served by that program.

Delaware Head Start Collaboration Office: 2009 Needs Assessment

Introduction and Overview of the Report

With the passage of the amended Head Start Act in December 2007, states that received Head State Collaboration grants must conduct an annual assessment through their Head Start Collaboration Offices that "...addresses the needs of Head Start agencies in the state with respect to collaboration, coordination and alignment of services, and alignment of curricula and assessments used in Head Start programs with the Head Start Child Outcomes Framework and, as appropriate, state early learning standards..." This needs assessment is intended to serve as the basis for state and local strategic planning to enhance collaboration and coordination of services between Head Start agencies and other organizations that provide early childhood, health care, mental health care, welfare, child welfare/child protective services, literacy, education, and general community services that touch the infant, toddler, and preschooler population, including children with disabilities and those who are homeless; and address professional development needs of their staff in response to new qualification and professional development requirements that will take effect in 2011.

Delaware is small in geographic size and in population, with a network of providers and technical assistance organizations that is more interconnected than in larger states. As a result, the state chose to expand the scope of this needs assessment beyond the state's four Head Start/Early Head Start programs (with one Migrant Head Start program included in this group). The state elected to also include its 12 state-funded Early Childhood Assistance Programs (ECAPs), three of which are located in Head Start programs, with the remainder affiliated with local school districts or other organizations. The decision to expand the needs assessment was made because ECAPs are mandated under state law to follow the Head Start Performance Standards. The mandate includes a commitment to triennial monitoring using federal trained reviewers.

The expanded coverage of this needs assessment will allow the state to better understand the support needs of these publicly-funded organizations serving young children and their families with respect to the areas referenced above. The Head Start Outcomes Framework was used as a foundation during the planning process for Delaware needs assessment.

This report represents the first formal needs assessment of Delaware Head Start/Early Head Start programs and Early Childhood Assistance Programs (ECAPs) with respect to collaboration, coordination and alignment of services, and alignment of curricula and assessments. This assessment will be updated annually to reflect the changing needs of the programs.

Organization of report – This report is organized into three sections. The first section provides an overview of Delaware and its early care and education environment. The second section provides an overview the Head Start/Early/Head Start programs and ECAPs that were the focus of the assessment. The third section contains the key findings of the needs assessment.

Section 1: Profile of Delaware and its Early Care and Education Environment

Overview of Delaware: Delaware is the second smallest state in the United States at 1,982 square miles. With an estimated population of 864,764¹, Delaware is the seventh least

¹ All population related data in this report are drawn from the U.S. Census Bureau's 2007 American Community Survey (U.S. Census Bureau, 2009).

populated state, including the District of Columbia. Located on the East Coast of the United States, Delaware borders New Jersey, Pennsylvania, and Maryland and has shores on the Atlantic Ocean and Delaware Bay.

Delaware is a diverse state. The median age is 37.6 years and 51.5% of the population is female. Delaware's racial-ethnic composition is 73.8% Caucasian, 20.7% African American, and 6.1% Hispanic/Latino, with small populations of Native and Asian Americans.

Delaware consists of three counties: New Castle, Kent, and Sussex.

New Castle County: Most of the state's population lives in New Castle County (61.1%), the state's northern most and largely urban and suburban county and home to its largest city, Wilmington (population 63,619). Wilmington's population is approximately 55% African American and 10% Hispanic/Latino, with 19% of families estimated to be below poverty level. The northern portion of the county, including Wilmington, is bisected by Interstates 95 and 295 and U.S. Highway 40/13.

New Castle County is home to a number of credit card and financial services companies, and large employers include Bank of America, Chase Bank, DuPont, the University of Delaware, and two health care systems. Most of the county's population lives in the northern portion of the county, but much of the recent and future growth is occurring in the southern portion, with a substantial growth in new housing stock.

Kent County: Located in the middle of the state, Kent is currently the third most populous county, with 17.6% of the state's population. The state capital, Dover (population 33,796; 43% African American, 6% Hispanic/Latino; 13% of families below poverty level), is located there. Also located in the county is Dover Air Force Base, a major logistical anchor for the U.S. Air Force and the Armed Services Mortuary Service. Large employers include state government, the Air Force base, Delaware State University, and a regional health care system. While it has become the third most populous county, the population continues to increase as a result of new development, especially in Dover and surrounding towns and cities.

Sussex County: Sussex County is known for its agriculture and broiler-chicken industry and is the second most populous county with 21.1% of the state's population. The county's Atlantic coast beaches and the state's low property tax rate have led to substantial increases in the population living in coastal areas, including significant numbers of retirees. Consequently, increases in housing stock and housing costs have occurred in those high growth areas. Much of the county has retained its rural, agricultural nature, but the influx of coastal area residents has also led to growth in areas further from the coast that abut the county's major roads.

Delaware's Early Childhood Population: The 0-5 year old age group accounts for about 8.1% of the state's population (about 70,000 children) and about 29% of the population under age 18 years.

In New Castle County, 14% of children from ages 0-5 years live below the poverty level. Caucasians accounted for 5%, African Americans accounted for 7.2%, and Hispanics/Latinos accounted for 3.7% of those who live below poverty level. In Kent County a total of 20% of children aged 0-5 live below the poverty level. Caucasians accounted for 8.6% and African Americans accounted for 9.3% of children who live below poverty level (no rate was provided for Hispanic/Latino children in this age group). In Sussex County a total of 18% children from ages 0-5 years live below the poverty level. Caucasians accounted for 8.5%, African Americans accounted for 5.6%, and Hispanics accounted for 4.5% of children 0-5 years who live below poverty level.

Noticeable differences between the counties are discernable. While New Castle County contains the most people of any ethnicity, both Kent and Sussex boast a larger percentage of Caucasian children living below poverty level compared to their northern counterpart. The poverty rate for African Americans is similar throughout both New Castle (7.2%) and Kent Counties (9.3%) but is lower in Sussex County (5%).

Information is also available about children age 0-5 years who have special health care needs (i.e., chronic health or other conditions such as asthma or a disability). The rate of children with special health care needs in Delaware is estimated at 10.4% for children aged 0-5 years, compared to 8.4% nationally (National Survey of Children with Special Health Care Needs 2005/2006).

Profile of Services for Preschool-aged Children in Delaware: According to April 2009 information from the Delaware Office of Child Care Licensing (Personal Communication), Delaware has the capacity to serve almost 56,000 children in community-based licensed programs. These programs include full-day programs in early care and education centers, Head Start/Early Head Start programs and ECAPs as well as part-day preschool programs. Under normal economic circumstances, these programs typically operate at close to full capacity. The state's Head Start/Early Head Start programs provide approximately 4.2% of this capacity and its ECAPs provide about 1.2%.

The Office of Child Care Licensing (OCCL), located in the state's Department of Services to Children, Youth and their Families, is responsible for licensing Delaware's child care and early care and education facilities (OCCL website, 2009). These facilities include:

- Family Child Care Homes – child care in a private home for one to six children preschool-age or younger and one to three school-age children;
- Large Family Child Care Homes – child care in a private home or commercial setting for seven to 12 children preschool-age or younger and one or two school-age children; and
- Early Care and Education and School-Age Centers (includes day care centers, nursery schools, preschools, before/after school care, and out of school care) – child care in a commercial (non-residential) setting for 13 or more children;

As of April 2009, Delaware has approximately 439 early care and education centers, 1,210 family child care providers, and 82 part-day programs. Based on estimates from 2008, approximately 6,000 people are employed by an organization providing early care and education services in the state. OCCL indicated current enrollment and staffing number breakdowns were not available for the three types of programs (Personal Communication).

Families who have incomes within 200% of poverty, have a job, or are in training for a job may be eligible for financial support through the state's "purchase of care" program, which allows for their children to be enrolled in an early care and education program. Several school districts have part-day and full-day early care and education programs as a means of serving preschoolers with disabilities. Most of these programs also enroll typically developing children as a means of creating mainstreamed settings.

Prior to the middle of this decade, Head Start/Early Head Start programs and ECAPs had the option to be licensed under the state's system because part-day programs were not required to be licensed. Many of them were licensed, however, and all of them currently are. The state adopted new regulations for early care and education programs in 2007, with new requirements for facility specifications, educational requirements for hiring personnel, and personnel professional

development plans. Head Start/Early Head Start programs and ECAPs had already instituted some of these practices prior to the state requirements.

Context of Delaware’s Early Care and Education System: Since the beginning of this decade, Delaware’s commitment to and efforts directed at improving the quality of early care and education have grown more substantial. In addition to regulatory efforts made by OCCL to improve quality, several studies have been conducted to explore quality of care issues, inform quality improvement efforts, and build public and political will around improving quality. Key reports have also been issued by organizations that have been influential in the quality improvement arena. Presented below are some examples of such reports and studies.

In 2000, for example, Delaware’s Interagency Resource Management Committee issued *Early Success, Creating a Quality Early Care and Education System for Delaware’s Children*. *Early Success* (Delaware Early Care and Education Council, 2006) outlined a number of strategies to increase the quality of early care and education in Delaware as well as to increase the public will towards supporting resources for Delaware’s youngest citizens. This report led to the initiation of a 2002 baseline study of the quality of early care and education in the state (Gamel-McCormick et al., 2003).

The baseline study collected demographic information about programs and rated program quality on a number of different characteristics. This study helped inform quality improvement efforts. Two findings relevant to this report are worth mentioning. First, staff employed by Head Start/Early Head Start programs and ECAPs had attained higher educational levels than those employed by other community-based programs. Second, the general quality of the Head Start/Early Head Start programs and ECAPs was found to be greater than that observed in child care centers.

As a final example, in 2006, a study of Delaware’s early care and education workforce was conducted (Yannetta, Amdsen, & Buell, 2007). One part of this study involved a survey to learn about the educational backgrounds of child care and early care education teachers. The study found that more than one fourth of teachers had a high school diploma or GED as their highest level of education. Almost half had an Associates Degree or some college credits and one fifth had a Bachelors Degree or higher. Two-thirds of teachers stated a willingness to devote time to getting additional education in early childhood. Table 1 provides more detail about the educational background findings to provide some context of Delaware’s workforce.

Table 1: Education of Employees by Type of Facility

Education Level		Type of Facility					Total
		Center	Part-day Program	Head Start	School-Age	Family Child Care	
Some High School	Number	27	1	0	1	7	36
	Percent	6.6%	0.6%	0.0%	1.4%	4.6%	4.4%
High School Diploma/GED	Number	127	31	1	16	46	221
	Percent	30.9%	18.8%	3.6%	23.2%	30.5%	26.8%
Some College Credits in Early Childhood	Number	82	36	11	13	23	165
	Percent	20.0%	21.8%	39.3%	18.8%	15.2%	20.0%

Table 1 (continued)

Education Level		Type of Facility					
		Center	Part-day Program	Head Start	School-Age	Family Child Care	Total
Some College Credits in Another Field	Number	84	29	5	14	47	179
	Percent	20.4%	17.5%	17.9%	20.3%	31.1%	21.8%
Associates in Early Childhood	Number	11	4	2	2	5	24
	Percent	2.7%	2.4%	7.1%	2.9%	3.3%	2.9%
Associates in Another Field	Number	13	11	1	1	6	32
	Percent	3.2%	6.7%	3.6%	1.4%	4.0%	3.9%
Bachelors in Early Childhood	Number	5	5	2	2	4	18
	Percent	1.2%	3.0%	7.1%	2.9%	2.6%	2.2%
Bachelors in Another Field	Number	53	42	5	17	12	129
	Percent	12.9%	25.4%	17.8%	24.6%	8.0%	15.7%
Masters in Early Childhood	Number	1	1	1	0	0	3
	Percent	0.2%	0.6%	3.6%	0.0%	0.0%	0.4%
Masters in Another field	Number	8	5	0	3	1	17
	Percent	1.9%	3.0%	0.0%	4.3%	0.7%	2.1%
Total	Number	411	165	28	69	151	824
	Percent	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

The bottom line is that Delaware’s Head Start/Early Head Start and Early Childhood Assistance Programs operate in a larger early care and education environment in the state that has been steadily and actively moving toward improved quality of services and staffing. This larger environment is also working to improve to the quality of HS/EHS programs and ECAPs as well.

Section 2: Profiles of Head Start/Early Head Start Programs & Early Childhood Assistance Programs (ECAPs)

Overview of Head Start/Early Head Start Programs and ECAPs

Head Start is a 40 year old federally funded program operated by local public and private non-profit and for-profit agencies to provide comprehensive child development services to children at or below the poverty, with a special focus on helping **preschoolers from age three years to school entry** develop the early reading and math skills they need to be successful in school. In 1995, the **Early Head Start program** was established to serve pregnant women and children from **birth to three years** of age in recognition of the mounting evidence that the earliest years matter a great deal to children's growth and development. **Migrant Head Start** was established to provide continuity of Head Start services to children of migrant farm workers. Children ages **birth to five years** whose families qualify based on the federal poverty income guidelines and the federal **definitions of migrant and seasonal farm workers are eligible for Migrant Head Start.**

Head Start/Early Head Start programs promote school readiness by enhancing the social and cognitive development of children by providing educational, health, nutritional, social and other services to enrolled children and families. They engage parents in their children's learning and help them make progress toward their educational, literacy and employment goals. Significant emphasis is placed on the involvement of parents in the administration of local Head Start/Early Head Start programs.

The **Office of Head Start State Collaboration** in the Delaware Department of Education serves as a liaison between the regional Head Start office, Head Start/Early Head Start grantees and state agencies providing services to low-income families. The mission of the Office's Collaboration Project is to create a visible presence for Head Start/Early Head Start at the state level in policymaking, partnerships, initiatives, and decisions that affect low-income children and their families. Goals of this project include: 1) coordinating with and supporting implementation of Early Success, Delaware's early care and education system; 2) ensuring Head Start/ Early Head Start participation in state level initiatives related to educational opportunities, childcare, inclusion, health, literacy, community services, welfare reform, and homelessness; and 3) facilitating the involvement of HS/EHS in state policies, plans, processes, and decisions affecting the HS/EHS eligible population and other low-income families related to dental services, mental health services, and services to children with disabilities.

The **Early Childhood Assistance Program (ECAP)** consists of 12 state funded pre-kindergarten programs for four-year-olds living at or below the federal poverty level. The ECAPs are administered by the Delaware Department of Education and operated by community-based organizations throughout the state, including existing Head Start grantees (which operate three ECAPs), school districts, community organizations and other early childhood agencies. The Department of Education, in cooperation with the Interagency Resource Management Committee (IRMC), oversees the implementation and operation of the state's pre-kindergarten initiative, called the Early Childhood Assistance Program (ECAP). ECAP was established in 1994 to address the need for improved school readiness by giving income eligible four-year-old children at least one year of preschool and reducing the waiting lists at Head Start centers.

Both Head Start/Early Head Start programs and ECAPs operate according to the Head Start Performance Standards (45 CFR part 1304) to serve preschool children and their families. Programs address the comprehensive needs of children and families by linking with existing services at the local level. These services are designed to meet the emotional, social, health, nutrition and psychological needs of preschool children and to respect their parents as the most critical influence in the child's life. Parents serve as partners with the local programs in creating policy and influencing the character of programs. Creating healthy families is an integral part of both Head Start/Early Head Start and ECAP, which is why the programs include home visits, parent involvement efforts, community collaborations, and referral services for children and families. Programs are mandated to serve at least 10% of children classified as having a disability and may allow up to 10% of enrolled children above the income guidelines. Table 2 provides a brief overview of the 13 HS/EHS programs and ECAPs.

Delaware has four Head Start/Early Head Start (two Head Start only, one Early Head Start only, and one Head Start/Early Head Start combined; one of these programs was, until January 2009, also a Migrant Head Start program) programs and 12 Early Childhood Assistance Programs (ECAPs) (three of the programs reside in Head Start programs). Within the four Head Start/Early Head Start programs and nine ECAPs 2,925 children are served. Of these children,

47.6% are African American, 10.6% are Caucasian, and 7.5% are of other backgrounds or multi-racial (racial information was not provide for 34.3% of children). Almost half of all children served in the two types of programs are Hispanic/Latino (48.7%). About one-third of children (33.2%) come from homes where the primary language spoken is not English, with Spanish (93%) the most common language among these children.

Table 2: Brief Descriptions of Head Start/Early Head Start Programs and ECAPs

Program Name	Areas Served	Number of Children Enrolled	Number of Teachers	Number of Assistant Teachers	Number of Other Staff
Head Start/Early Head Start Programs					
New Castle County Head Start	New Castle County	695	33	68	16
New Directions Early Head Start	New Castle County	213	22	16	17
Telamon Corporation	New Castle, Kent, and Sussex Counties	848	62	43	20
Wilmington Head Start	Wilmington	548	28	29	11
Early Childhood Assistance Programs					
Brandywine School District	Wilmington	53	3	3	0
Christina Cultural Arts Center	Wilmington	20	1	1	0
Christina School District	New Castle County	67	10	12	0
Delaware Early Childhood Center	Kent and Sussex Counties	295	13	13	0
Delaware Tech Child Development Center	Sussex County	18	2	7	0
Hilltop Lutheran Center	Wilmington	59	3	3	0
Kreative Kids Incorporated	Kent County	19	1	1	0
Latin American Community Center	Wilmington	41	3	1	0
Project Village	Sussex County	36	1	2	0

The four Head Start/Early Head Start programs directly operate 107 classes at a total of 33 center locations. Locations are staffed by 509 HS/EHS staff and 57 contracted staff, supported by 3,411 volunteers. Tables 3 and 4 provide detailed information on the number of children enrolled and their characteristics.

Table 3: Head Start and Early Head Start – 2007-2008 State-wide Enrollment Information

Funded Enrollment:		
ACF Funded Head Start or Early Head Start Enrollment:	1,622	
State Funded Early Childhood Assistance Program Enrollment	304	
Total funded Head Start or Early Head Start enrollment (all sources)	1,926	
Funded Enrollment by Program Option:		
Center based program - 5 days per week	<i>Funded Enrollment</i>	<i>Average Annual Days</i>
Full day enrollment (6 or more hours per day):	402	168
Part day enrollment (less than 6 hours per day):	1,441	161
Double session enrollment (of those in part day):	0	
Center based program - 4 days per week		
Full day enrollment (6 or more hours per day):	0	0
Part day enrollment (less than 6 hours per day):	0	0
Double session enrollment (of those in part day):	0	
Home-Based Program:	77	
Combination Program:	0	0
Family Child Care:	6	230
Locally Designed Options:	0	0
Total Funded Enrollment by Program Option:	1,926	
Total number of pregnant women reported in funded enrollment:	16	
Of the children served in a center-based program, the number who received Head Start or Early Head Start services at a child care center partner:	98	
Children enrolled in Head Start or Early Head Start program options providing 8 or more hours of service per day:	392	
Actual Enrollment		
Total Actual Enrollment:		2,340
Total Actual Enrollment of Children:		2,317

Table 4: Head Start and Early Head Start–Characteristics of Children Enrolled, 2007-2008

Actual Enrollment by Child			
Ages of children served:			
Under 1 year:	114	3 Years old:	764
1 Year old:	91	4 years old:	993
2 Years old:	73	5 Years and older:	282
Actual Enrollment of Pregnant Women: (EHS Programs Only)			
17. Total actual enrollment of pregnant women:			23
18. Of the pregnant women enrolled, the number who were under 18 years of age:			0
Actual Enrollment of Children by Type of Eligibility			
Enrolled based on receipt of public assistance:			335
Enrolled based on income eligibility (below 100% of the federal poverty line):			1,836
Enrolled although the families were over-income (above 100% of federal poverty line):			140
Children enrolled due to status as a foster child:			29
Prior Enrollment of Children:			
Children enrolled in Head Start or Early Head Start for their second year:			751
Children enrolled in Head Start or Early Head Start for three or more years:			60
Actual Enrollment by Ethnicity and Race:			
Ethnicity			
Hispanic or Latino Origin:	1,252	Non-Hispanic/Non-Latino Origin:	1,088
Race			
American Indian or Alaska Native:	1	White:	229
Asian:	24	Bi-Racial or Multi-Racial:	131
Black or African American:	1,094	Other (Comments Required)	2
Native Hawaiian or other Pacific	0	Unspecified:	859
Actual Enrollment by Primary Language of the Family at Home			
English:	1,528	Native North American or Alaska Native Languages:	0
Spanish:	751		
Native Central American, South American and Mexican Languages:	19	Pacific Island Languages:	0
Caribbean Languages:	14	European and Slavic Languages:	2
Middle Eastern and South Asian Languages:	8	African Languages:	3
East Asian Languages:	13	Other	2
		Unspecified:	0

The nine ECAPs not associated with a Head Start program directly operate 32 classes at a total of 16 center locations. Locations are staffed by 105 ECAP staff and 40 contracted staff, supported by 444 volunteers. Tables 5 and 6 provide detailed information on the number of children enrolled in the ECAPs and their characteristics.

Table 5: Early Childhood Assistance Programs – 2007-2008 State-wide Enrollment Information

Funded Enrollment:		
DE Department of Education Funded ECAP Enrollment:		
Enrolled in ECAP Only Programs:	522	
Enrolled in Head Start-based ECAP Programs	304 ²	
Non-DE Department of Education Funded ECAP Enrollment:	3	
Total funded ECAP enrollment (all sources and programs)	829	
Funded Enrollment by Program Option:		
Center based program - 5 days per week	<i>Funded Enrollment</i>	<i>Average Annual Days</i>
Full day enrollment (6 or more hours per day):	49	179
Part day enrollment (less than 6 hours per day):	476	168
Double session enrollment (of those in part day):	44	
Center based program - 4 days per week		
Full day enrollment (6 or more hours per day):	0	0
Part day enrollment (less than 6 hours per day):	0	0
Double session enrollment (of those in part day):	0	0
Home-Based Program:	0	0
Combination Program:	0	0
Family Child Care:	0	0
Locally Designed Options:	0	0
Total Funded Enrollment by Program Option:	525	
Of the children served in a center-based program, the number who received ECAP services at a child care center partner:	59	
Children enrolled in ECAP Options providing 8 or more hours of service per day:	30	
Actual Enrollment		
Total Actual Enrollment:		608
Total Actual Enrollment of Children:		608

² Because of the method for generating Program Information Reports, these children are not included in the remainder of this table or the one that follows. They are included instead in the equivalent Head Start/Early Head Start tables that were presented earlier.

Table 6: Early Childhood Assistance Programs –Characteristics of Children Enrolled, 2007-2008

Actual Enrollment by Child Age			
Ages of children served:			
Under 1 year:	0	3 Years old:	0
1 Year old:	0	4 years old:	607
2 Years old:	0	5 Years and older:	0
Actual Enrollment of Children by Type of Eligibility			
Enrolled based on receipt of public assistance:			87
Enrolled based on income eligibility (below 100% of the federal poverty line):			476
Enrolled although the families were over-income (above 100% of federal poverty line):			39
Children enrolled due to status as a foster child:			6
Actual Enrollment by Ethnicity and Race:			
Ethnicity			
Hispanic or Latino Origin:	183	Non-Hispanic/Non-Latino Origin:	425
Race			
American Indian or Alaska Native:	25	White:	84
Asian:	5	Bi-Racial or Multi-Racial:	32
Black or African American:	310	Other	0
Native Hawaiian or other Pacific	0	Unspecified:	152
Actual Enrollment by Primary Language of the Family at Home			
English:	442	Native North American or Alaska Native Languages:	0
Spanish:	158		
Native Central American, South American and Mexican Languages:	0	Pacific Island Languages:	0
Caribbean Languages:	5	European and Slavic Languages:	0
Middle Eastern and South Asian Languages:	2	African Languages:	1
East Asian Languages:	0	Other	0
		Unspecified:	0

Section 3: Needs Assessment Methodology and Findings

This section provides a brief overview of how the needs assessment was conducted and a discussion of key findings. Presented first is a description of the methodology. An overview of key findings is then presented. For the reader interested in more details about the methodology or in more detailed data from the survey, technical appendices that contain this information may be found on the Head Start Collaboration Office's website (www.doe.k12.de.us/infosuites/students_family/hs/about.shtml).

Needs Assessment Methodology: The needs assessment was conducted through a combination of approaches. First, a needs assessment survey (based on a survey developed by a national committee of state Collaboration Office Directors representing each region) was administered to all 13 of Delaware's HS/EHS programs and ECAPs. This survey covered 10 priority topic areas:

1. Health Care
2. Services for Children Experiencing Homelessness
3. Welfare/Child Welfare
4. Child Care
5. Family Literacy Services
6. Services for Children With Disabilities
7. Community Services
8. Partnering with Early Childhood Assistance Programs
9. Partnering with Local School Districts for Head Start Transition and Alignment With K-12 System
10. Professional Development

Priority areas one through seven and 10 applied to all programs. Programs responded to either priority area eight or nine depending on their program type. The survey included three parts for each priority area.

Part 1 asked programs to rate the extent of their involvement with various service providers/organizations related to the priority area. A 4-point scale was used for rating progress in relationship building. Definitions of each scale item were provided (see below).

Part 1 Likert Items and Definitions:

No working relationship. You have **little or no contact with each other** (i.e.; **you do not:** make/receive referrals, work together on projects/activities, share information, etc.)

Cooperation. You **exchange information.** This includes making and receiving referrals, even when you serve the same families.

Coordination. You **work together on projects or activities.** Examples: parents from the service providers' agency are invited to your parent education night; the service provider offers health screenings for the children at your site.

Collaboration: You **share resources and/or have formal, written agreements.** Examples: co-funded staff or building costs; joint grant funding for a new initiative; an MOU on transition, etc.

Part 2 included two sections:

Section 2A asked programs to indicate how much difficulty they have had engaging in a variety of activities and partnerships. A 4-point scale of difficulty was provided: "Extremely

Difficult,” “Difficult”, “Somewhat Difficult”, and “Not At All Difficult.” The purpose of this part was to help programs identify challenges in building successful partnerships.

Section 2B asked respondents to rank a variety of activities on one of four levels, using a 4-point scale. Definitions of each scale item were provided (see below).

Section 2B Likert Items and Definitions:

AC = Area of concern: does not meet Head Start Performance Standard - based on most recent federal/state monitoring, report review and/or self-assessment.

EC = Emerging Concern. Standard is currently met but because of program changes, community changes, declining program data and/or changing requirements per Head Start Act could compromise program status.

PS = Performance Standard is met based on most recent federal/state monitoring, report review and/or self assessment review.

S = Strength: meets and exceeds Head Start Performance Standard requirement -This strength has been identified during self assessment, planning, and/or received internal or external recognition.

Open-ended questions were also provided at the end of each priority area to give programs a chance to share other efforts, concerns not covered in the survey, and to document what is working well in the program (e.g., successful strategies/activities that may be helpful to other programs).

The Center for Disabilities Studies at the University of Delaware conducted data entry and analysis, and followed-up as needed with program directors to reach a 100% response rate. Because of a later interpretation of state Pre-K in Delaware, the eighth priority area, Partnering with Early Childhood Assistance Programs, was excluded from the report. Initially, this section was included in the survey because the ECAPs are pre-Kindergarten programs. However, these programs are administered by the state Department of Education, not Local Education Agencies. State-level management is a different arrangement than in most parts of the country and the criteria in the Head Start Act and the survey section do not apply to state-run programs. After consulting with the HSCO and ECAP directors, a decision was made to exclude this priority area from the analysis because of these applicability issues.

A second approach in the needs assessment was discussion of initial analyses of the survey data presented at a November 14th planning meeting involving HSCO, ECAP, and individual program directors, and CDS staff. This discussion allowed for a level of initial interpretation of the data and identification of issues not covered by the survey.

A third approach involved examining additional information, including HS/EHS and ECAP Program Information Reporting (PIR) data profiles, information on curriculum alignment, and information about migrant services and issues. CDS staff reviewed this information to provide another way of examining potential program support needs with respect to collaboration, coordination and alignment of services, and alignment of curricula, and state early learning standards.

Finally, expert opinion was sought by CDS staff about the meaning of all of the data in terms of strengths and needs related to the priority areas. Draft data sections of this report were shared with the retired HSCO Director and the ECAP Director to gather input about issues, needs, and strengths not adequately or accurately reflected in the survey and PIR data.

Key Findings of the Needs Assessment: This section presents first global needs and strengths that cut across the nine priority areas that were the focus of the needs assessment. Following that discussion is a presentation of needs and strengths that relate specifically to each priority area. Finally, somewhat more in-depth discussions of findings that support the needs and strengths determinations are presented for the nine priority areas and two additional topics: 1) curriculum alignment with state standards and outcomes; and 2) migrant population and services. This Key Findings section presents a summary-level picture of the assessment findings. Table 7 presents a briefer summary of these findings. Readers interested in more detailed results from the survey may find this information in technical appendices on the Head Start Collaboration Office's website (www.doe.k12.de.us/infosuites/students_family/hs/about.shtml).

Global Strengths and Needs

The changes in the revised Head Start reflect small changes in program requirements and collaboration expectations in most priority areas, with relatively small impacts on programs. However, some priority areas include substantial changes that have major impacts that programs still need to navigate. It is not surprising then, that identified needs outweigh strengths at both global and priority area levels. The should not be seen as reflection of program quality, but rather a reflection of the fact that programs, as well as the state Head Start Collaboration and ECAP offices, are still in the process of responding to the changes in the Head Start Act.

Global Strengths: Both HS/EHS programs and ECAPs appear to be resourceful in meeting the needs of families and children and are committed to the spirit of local and state collaboration. (However, time and resource limitations often mean programs are not able to collaborate, particularly at the state level, to the extent they would like to.) These strengths are reflected in how well programs perform on monitoring visits and in child outcomes. For example a 2007-08 outcomes study (Cornwell, 2008) of 262 Head Start and ECAP children that assessed progress on the *Creative Curriculum* revealed that these children made significant progress, with children achieving, on average, 58% of the skills overall at the highest level of the curriculum by the end of the year. These strengths are also reflected in programs' abilities to make linkages to connect families with key resources and referrals to support families and meet their needs, even though formal collaboration agreements may not always be in place.

Global Needs: Perhaps the major need that cuts across a number of priority areas (e.g., Homelessness Services, Child Care, Welfare/Child Welfare, Community Services, Partnering with Local Education Agencies) relates to meeting the new full day/full year service definitions in the revised Head Start Act. The change in the definition of full day from 6 to 8 hours to over 8 hours has several implications. First, programs will need to gather new information about the number of families in need of full-day/full-year services. Given the new definition, currently available information is not adequate for identifying the extent of the need. Second, the array of program options and services will need to be reviewed to identify possible enhancements to meet the extended definition and possibly increased need. Finally, existing partnerships may need to be enhanced, or new ones developed, to meet program service gaps related to child care, community services, and a variety of other areas.

Another need that crosses a number of priority areas relates to outreach to other agencies around conducting professional development for program staff. The needs assessment results suggest that HS/EHS programs and ECAPs may benefit from help other agencies in the

community could provide to program administrators and other program staff around three areas: 1) understanding the available services offered by these agencies; 2), strategies these agencies use to provide for the needs of families; and 3) how HS/EHS programs and ECAPs can most appropriately/effectively meet the needs of the families they serve.

Needs and Strengths By Priority Area

Health Care: Needs: In this priority area, representation on program Health Advisory Committees and helping families get transportation to medical appointments are the areas programs identified as the most important issues. The PIR data suggest that programs might benefit from assistance related to immunizations and linking children to dental homes. Also, based on PIR data and expert opinions, programs may benefit from some assistance around helping undocumented families access health services (and likely other community services as well).

Services for Children Experiencing Homelessness: Needs: Given the introduction of McKinney-Vento homelessness services requirements in the revised Head Start Act, HS/EHS programs and ECAPs appear to have several needs related to homelessness services. First, programs may need assistance locating and/or accessing data about the needs of homeless children and families. This information will be important in addressing a second need – increasing enrollment levels of homeless children and families to meet increased expectations under the revised Head Start Act. There also appears to be a need to develop relationships with agencies and organizations that serve families and children who are homeless or address homelessness issues at community level. This includes developing closer relationships with McKinney-Vento liaisons in local school districts. These connections would help both with enrolling children who are homeless in HS/EHS programs and ECAPs and helping programs effectively coordinate efforts to meet the needs of these families and children.

Strengths: A strength of HS/EHS programs and ECAPs in this area is their willingness to align policies, procedures, and programming to meet the McKinney-Vento requirements.

Welfare/Child Welfare: Needs: Considering the changes in expectations in the Head Start Act related to welfare/child welfare, the number of families that would potentially benefit from a variety of welfare/child welfare services, and programs' current low levels of collaboration with the types of agencies asked about in the survey, there may be need for support around relationship development in this area. Support for families moving into employment, experiencing domestic violence, and foster care and adoptive families may be particular areas of focus. Also, more data are needed on different populations (e.g., number of foster families) to better understand the level of need in program service areas.

Table 7: Summary of Key Findings

	Needs	Strengths
Global (Cross-Priority Areas)	<p>1. Cross-cutting needs related to the expansion of full day to over 8 hours:</p> <ul style="list-style-type: none"> • Programs need new information about the number of families in need of full-day/full-year services. • Review program options and services to identify possible enhancements to meet the extended definition and possibly increased need. • Enhance/expand partnerships to meet program service gaps related to child care, community services, and a variety of other areas. <p>2. Outreach to other agencies around conducting professional development for program staff in three areas:</p> <ul style="list-style-type: none"> • Understanding available services these agencies offer; • Strategies these agencies use to provide for the needs of families; • How programs can most appropriately/effectively meet the needs of the families they serve. 	<p>1. Programs appear resourceful in meeting the needs of families and children and are committed to the spirit of collaboration.</p> <p>2. These strengths are reflected in how well programs perform on monitoring visits, in child outcomes, and in programs' abilities to make linkages to connect families with key resources and referrals</p>
<u>Priority Areas</u>		
Health Care	<p>1. Increasing representation on program Health Advisory Committees.</p> <p>2. Helping families get transportation to medical appointments.</p> <p>3. Assistance related to immunizations</p> <p>4. Assistance linking children to dental homes.</p> <p>5. Helping undocumented families access health services (and likely other community services as well).</p>	
Service for Children Experiencing Homelessness	<p>1. Locating data about the needs of homeless children and families.</p> <p>2. Increasing enrollment of homeless children and families.</p> <p>3. Developing relationships with agencies and organizations that serve families and children who are homeless or address</p>	<p>Willingness to align policies, procedures, and programming to meet McKinney-Vento requirements.</p>

	Needs	Strengths
	homelessness issues at community level, including developing closer relationships with McKinney-Vento liaisons in local school districts.	
Welfare/Child Welfare	<ol style="list-style-type: none"> 1. Support around developing relationships with Welfare/Child Welfare-related agencies and organizations. Support for families moving into employment, experiencing domestic violence, and foster care and adoptive families may be particular areas of focus. 2. More data on different populations (e.g., number of foster families) to better understand needs in program service areas. 	
Child Care	<p>Most needs in this area are captured in Global Needs. Additional needs include:</p> <ul style="list-style-type: none"> • Aligning policies and practices with other service providers. • Developing ways of effectively sharing information about children who are served by multiple agencies. 	Extent of existing relationships with child care providers.
Family Literacy Services	Helping programs understand and access resources related to family literacy and library programs.	
Services for Children with Disabilities	<ol style="list-style-type: none"> 1. Support for developing/enhancing collaborative recruitment efforts with agencies serving children with disabilities. 2. Support for developing effective ways for providing early intervening services before eligibility determinations. 3. At the system level, assistance to facilitate quicker responses to program referrals for evaluation. 	Most programs have agreements with Local Education Agencies or Part C providers to coordinate services.
Community Services	<ol style="list-style-type: none"> 1. Support to enhance relations with other community organizations to strengthen support for families. 2. Support to help maximize the use of community organizations and businesses as sources of in-kind resources and volunteers. 	

	Needs	Strengths
Partnering with Local School Districts for Head Start Transition and Alignment with K-12	<ol style="list-style-type: none"> 1. Transition processes need to be more formal and data driven under the revised requirements. 2. Transition processes also need to be improved to promote the expected level of alignment between preschool and kindergarten. 3. State-level efforts may be needed to strengthen relationships between programs and local school districts and to enhance transition procedures. 	
Professional Development	<ol style="list-style-type: none"> 1. Stronger relationships with 4-year colleges to meet new Bachelor's degree requirements for teachers. Developing/creating access to degree programs that can be completed outside of the regular work day will be important. 2. More teachers need to pursue 4-year programs to meet the new requirements of the Head Start Act. 3. More Assistant Teachers need to pursue relevant programs leading to required credentials. 4. Enhance outreach to community organizations to provide professional development opportunities for support staff who work with families, and staff need to pursue these opportunities. 5. State needs to work to coordinate the efforts of the state Head Start Training and Technical Assistance office and the Delaware Institute for Excellence in Early Childhood to efficiently provide professional development programming. 	<ol style="list-style-type: none"> 1. Programs have good relationships with 2 year community colleges. 2. Programs appear resourceful in securing community resources for professional development activities. 3. The state-based training and technical assistance system for Head/Early Head Start and the Delaware Institute for Excellence in Early Childhood are two important new system-level strengths related to professional development.
<u>Other Assessment Topics</u>		
Alignment of Program Curricula with State Standards and Outcomes	Curriculum mapping work for ages 0-3 curriculum.	<ol style="list-style-type: none"> 1. Extensive curricula mapping for the ages 4-5 curriculum. 2. State's decision to apply the same curricula and outcomes standards to both HS/EHS programs and ECAPs.
Migrant Population and Services	An effective way to meet the needs of migrant families and children previously served by Migrant Head Start.	

Child Care: Needs: Needs in this area center around the challenge of meeting the new full day/full year requirements in the revised Head Start Act. Almost all of these are captured in the global needs section and, for the sake of brevity, will not be repeated here. Aligning policies and practices with other service providers and developing ways of effectively sharing information about children who are served by more than one agency are other needs in this priority area.

Strengths: The extent of relationships with child care providers appears to be a strength in this area. These relationships will be important assets as programs work to meet the new full day/full year requirements.

Family Literacy Services: Needs: The primary need for this priority area appears to be for assistance around helping programs understand and access resources related to family literacy and library programs.

Services for Children with Disabilities: Needs: There are several needs in this priority area as a result of changes to the Head Start Act. First, programs would benefit from developing or enhancing collaborative recruitment efforts with agencies serving children with disabilities. Second, programs might benefit from assistance related to developing effective procedures for providing early intervening services to children with disabilities prior to eligibility determinations by appropriate agencies. At the system level, there also appears to be a need for assistance to facilitate quicker responses to program referrals for evaluation.

Strengths: The majority of programs have local agreements with Local Education Agencies or Part C providers to coordinate services for children with disabilities.

Community Services Needs: There are two needs specific to this priority area. First, programs may need support to enhance relations with other community organizations in order to strengthen support for families. Second, programs may benefit from support that would help them maximize the use of community organizations and businesses as sources of in-kind resources and volunteers.

Partnering with Local School Districts for Head Start Transition and Alignment with K-12: Needs: The higher expectations for transition in the revised Head Start Act create several needs for programs. While all programs have transition processes, these are not as formal and data driven as needed under the revised requirements. These processes also are not at a stage that promotes the expected level of alignment between preschool and kindergarten. Specific state-level efforts may be needed to foster the development of stronger relationships between programs and local school districts and to enhance transition procedures to meet the new requirements.

Professional Development: Needs: To meet the new Bachelor's degree requirements for teachers, programs will need to work on strengthening relationships with 4-year colleges. An important aspect of this work will be developing/creating access to necessary degree programs that can be completed outside of the regular work day (e.g., evening and on-line courses, self-paced content). More program teachers will need to take advantage of these programs to meet the new requirements of the Head Start Act. More Assistant Teachers will also need to pursue relevant programs leading to required credentials. Programs will also need to enhance outreach to community organizations to provide professional development opportunities for support staff

who work with families, and staff will need to pursue these opportunities. Efforts will also need to be made by the Head Start Collaboration and ECAP offices to coordinate the efforts of the state Head Start Training and Technical Assistance office and the Delaware Institute for Excellence in Early Childhood to efficiently provide professional development programming that meets the needs of programs and staff.

Strengths: Programs have good relationships with 2 year community colleges, which has helped them meet educational and professional development requirements under the previous version of the Head Start Act. Programs also appear resourceful in securing community resources to meet required professional development activities. Two important new system-level strengths have recently emerged that show great promise in delivering quality professional development opportunities to the entire state early care and education community. First, a state-based training and technical assistance system for Head/Early Head Start programs was developed early in 2008. Second, the Delaware Department of Education awarded a contract in September 2008 to the University of Delaware to develop the Delaware Institute for Excellence in Early Childhood. The Institute brings together myriad resources related to professional development for the early care and education community and is designed to provide a comprehensive and coordinated approach to early childhood professional development in Delaware and build a system of connected technical assistance to providers.

Other Assessment Topics

Alignment of Program Curricula with State Standards and Outcomes: Needs:

Extensive work has been done on mapping program curricula for children ages 3-5 years to state standards and outcomes. The primary need in this area is for similar work with program curricula for children ages 0-3 years.

Strengths: The extensive curricula mapping that has been done to date is a definite strength. Also, the state's commitment to assessing outcomes and its decision to apply the same curricula and outcomes standards to both HS/EHS programs and ECAPs are positives as well.

Migrant Population and Services: Needs: With the decision by Telamon to relinquish the Migrant Head Start grant, the major need in this area is to find an effective way to meet the needs of migrant families and children who been served by that program.

Findings in Support of the Needs and Strengths Determinations

Presented below are summaries of the findings on which the determination of needs and strengths are based. These are organized by the nine priority and two additional areas. Also, for each priority area, findings are presented separately for HS/EHS programs and ECAPs.

Health Care

The revised Head Start Act addresses health-related services in two ways. First, it gives Head Start/Early Head Start programs the option of offering health services, including information on maternal depression. Second, there is an expectation that collaboration and coordination between HS/EHS programs and health care service providers will be enhanced to best meet the health care needs of enrolled children and families.

Health Insurance: Information from the PIRs indicates that a relatively small number of children enter HS/EHS programs and ECAPs without health insurance, and that by the end of the program year, those numbers were reduced (particularly so for HS/EHS programs). At the end of

the program year, though, 81 children (50 in HS/EHS programs, 31 in ECAPs) were without health insurance, likely due to eligibility issues related to immigration status. Not surprisingly, programs reported few issues in the survey related to health insurance.

Medical-related Services: According to PIR data, few children did not have a medical home by the end of the year. Survey responses also indicated programs had few concerns or issues in this area. What cannot be determined, however, is the extent to which these children actually meet the definition of medical home. The Consensus Statement on Medical Home Principles (American Academy of Family Physicians et al, 2007) articulates ‘medical home’ as having multiple components, not simply having a regular source of care. Inquiring about the specific components provides a much better picture of the extent to which families have a medical home.

As far as partnering with health professionals on health-related issues such as screenings, safety, etc., one third of programs reported challenges and concerns in this area. Six programs reported ‘no working relationship’ or ‘cooperation’ with agencies serving children with special health care needs, though few difficulties and concerns were reported.

PIR data indicate that almost all children (97.7%) were up-to-date with respect to recommended preventive and primary health care. Almost 9% had been diagnosed as needing treatment and all but a few of these children had received recommended treatment. Most children (85%) were up to date on all immunizations by the end of the program year (82.2% for HS/EHS programs, 95.6% for ECAPs). More than 10% were identified as having had all immunizations possible at that time, but not all that were appropriate for their age (16.2% for HS/EHS, 2.1% for ECAPs).

Dental services: PIR data indicate that most children in Head Start programs and ECAPs (about 90%) had a dental home (note: this information is not collected for EHS programs). Survey data reveal that 5 programs (38.5%) reported linking children to dental homes that serve young children as a difficulty, with three (23.1%) reporting this as a concern.

In the previous 12 months, 89.5% of children, according to PIR data, had a dental exam (92.5% for HS/EHS programs, 77.8% for ECAPs). Nearly all of these children received preventive dental care. About 27% of those who received preventive care received a diagnosis that warranted treatment. However, about 25% did not receive treatment that was recommended.

With respect to working with oral health professionals on oral health related issues, eight respondents (61.5%) indicated ‘no working relationship’ or ‘cooperation.’ Few challenges were evident in partnering with these professionals on oral health-related issues (e.g., hygiene, education), with only three respondents (23.1%) reporting difficulties, although five indicated it was a concern (38.5%).

Other issues: Two other issues were the most significant ones identified in the survey. Getting full representation on program Health Advisory Committees (seven programs [53.9%] reported difficulties, eight [61.6%] reported concerns) and helping families get transportation to appointments (five [38.5%] reported difficulties, four [30.8%] reported concerns) were the only areas of note.

Head Start/Early Head Start: ‘No working relationship’ was reported by three programs for state and local agencies providing mental health-related services and two programs for home visiting providers. Seven other organizations/resources had one program reporting ‘no working relationship.’ At least two programs reported difficulties for almost half the activities (seven of 15) in this section. Thematically, five of these activities fall into two categories: working with medical and dental providers and helping families communicate with health/mental health

professionals. Helping families to get transportation to appointments and getting full representation and active commitment on Health Advisory Committees were the other two areas of difficulty. Mostly single programs raised almost all of the concerns in these same areas. Three programs indicated partnering with oral health professionals was a concern and two did so for representation on the Health Advisory Committee.

ECAPs: Four to six programs reported ‘no working relationship’ with three types of organizations/groups: oral health professionals on oral health-related issues (six programs), agencies or initiatives focused on enrollment in CHIP, Medicaid or other local insurance plans, and home visiting providers (four each). Few difficulties were reported in these areas. Five programs indicated getting full representation and active commitment on program Health Advisory Committees was difficult and three did so for assisting families in getting transportation to appointments. Relatively few concerns were noted as well, with six and three programs, respectively, indicating concerns for the aforementioned activities and three indicating partnering with medical professionals on health-related issues was a concern.

Services for Children Experiencing Homelessness

Providing services or engaging in activities related to children and families who are homeless is not a new requirement under the revised Head Start Act, but the application of McKinney-Vento requirements to Head Start/Early Head Start programs is. It is not surprising then, that few homeless children and families are reported by Head Start/Early Head Start programs or ECAPs in their PIR data. However, it is likely that the number of homeless children served is higher than reported, as reported numbers depend on how programs define homelessness and the extent to which homeless children and families are accurately counted in programs’ information systems. It should also not be surprising that HS/EHS programs and ECAPs have lower levels of involvement with agencies that address homelessness issues, as the inclusion of McKinney-Vento requirements sets higher expectations than existed in earlier versions of the Head Start Act.

Looking more closely at relationships between HS/EHS programs and ECAPs and agencies addressing homelessness issues, fewer than half of programs have working relationships with the Homeless (McKinney-Vento) liaison in local school districts, local agencies that serve homeless families, or local housing agencies or planning groups (e.g., homeless shelters, Ten Year Plan to End Homelessness committees).

HS/EHS programs and ECAPs reported few difficulties or concerns with respect to activities that they have a high degree of immediate control over (e.g., aligning program and McKinney-Vento Homelessness Act definitions of homelessness). Engaging community partners in conducting cross training and planning activities and coordinating with local school districts to conduct family outreach and support and transition planning for children experiencing homelessness was problematic for more than half of programs. Obtaining enough data on the needs of homeless children to program community assessments was an issue for almost one-third of programs.

Head Start/Early Head Start: The number of homeless families represented just over 1% of the total number of families enrolled (27 across all programs; range 3-11). At least half of programs indicated ‘no working relationship’ with the three types of organizations listed in the survey, although two programs indicated ‘coordination’ with local agencies that serve homeless families.

Difficulties and concerns reported in the survey followed the state level pattern – few difficulties and concerns with activities directly under program control, more for activities that involve other organizations (e.g., engaging community partners for cross-training and planning, obtaining enough data on the needs of homeless children).

Considering the new homelessness requirements in the Head Start Act, HS/EHS programs may have a need for support around building working relationships with agencies that address homelessness issues.

ECAPs: ECAPs appear to serve very few homeless children and families (five across all nine programs). In spite of this, working relationships were reported by nearly half of programs for homelessness liaisons with school districts and by two-thirds with local housing agencies and planning groups. Overall, programs reported very few difficulties and concerns for most activity areas. Engaging community partners in cross-training and planning activities and coordinating to conduct family outreach and support and transition planning were the areas of most difficulty and greatest concern.

Welfare/Child Welfare

The revised Head Start Act does not include significant changes related to welfare/child welfare services. Rather small changes in language were made to: 1) specifically include foster parents, grand parents, and kinship caregivers in family needs assessments and other family activities; 2) specifically include protective services and foster care providers/organizations in needs assessment and strategic planning activities, with expectations of coordinating and leveraging services; and 3) emphasize collaboration and coordination with the agency responsible for administering the Child Abuse Prevention and Treatment Act.

PIR data indicate that most children in both programs (79.0%) lived in families which (by program eligibility guidelines) had incomes less than 100% of the federal poverty level. More than half of children (57.5%) lived in single parent families and 1.2% lived with foster families. Also, 38.7% of families received emergency/crisis intervention which addressed an immediate need for food, clothing, shelter (43.8% for HS/EHS families, 19.6% for ECAP families); 14.0% received housing assistance (subsidies, utilities, repairs, etc.), and 16.3% received child abuse and neglect services (19.6% for HS/EHS families, 4.1% for ECAP families). Taken together, these data suggest that risks for child abuse and neglect and the need for close collaboration with agencies that can provide supportive services are not minimal.

Few HS/EHS programs or ECAPs reported ‘coordination’ or ‘collaboration’ with any of the 6 agency types in this priority (TANF; Employment & Training and Labor Services; Economic and Community Development Councils; Child Welfare; and services and networks that support foster and adoptive families) asked about on the survey. While not reflected in the survey data, the PIR indicate both that programs have relationships with agencies that provide family services and that they have efforts related to this priority area.

Almost two-thirds of programs reported that facilitating shared training and technical assistance opportunities was challenging. Most of the remaining items (e.g., obtaining information and data for community assessment and planning; developing local partnership agreements) were issues for about 30% of programs.

Head Start/Early Head Start: Almost all programs reported ‘no working relationship’ or ‘cooperation’ or less for all types of organizations listed. Difficulties and were reported in three areas primarily: establishing and implementing local interagency partnership agreements; facilitating shared training and TA opportunities (three programs each reported difficulties; one

each reported concerns); and getting involved in state level planning and policy development (two programs indicated difficulties, and two concerns).

ECAPs: A similar pattern of relationships was evident for ECAP programs, with most reporting ‘cooperation’ or less for all organization types. Relatively few difficulties were reported, with five of nine programs indicating that facilitating shared training and TA opportunities was challenging (three of seven indicated it was a concern). Three of nine programs also that indicated obtaining information for annual community assessments and working together to target recruitment to families receiving services provided by the agency types listed was difficult (although seven of seven indicated the latter was a concern). Finally, getting involved in state level planning and policy development was a concern for three of seven programs.

Child Care

The revised Head Start Act includes expectations for collaboration and coordination of activities with: 1) child care programs under the Child Care and Development Block Grant Act of 1990; 2) other entities providing early childhood education and development programs or services; and 3) agencies providing resources and referral services.

PIR data indicate that 43.0% of children enrolled in HS/EHS programs and ECAPs needed full day/full year child care services (based on the previous definition of full-day as 6-8 hours) to meet parent needs related to work or job training. Almost one fourth of children (22.1%) received full year/full day services from an HS/EHS program or an ECAP (just over half of those who needed full day/full year services). Given that the new full day definition has not been incorporated into data collection procedures yet, it is difficult to know how many more families would have a need for full day services. Additional service amounts were most frequently provided through care at the child’s home or at another home with a relative or unrelated adult (about 50%; 56.7% for HS/EHS, 21.5% for ECAPs); care at a child care center or class (about 38%; 25.5% for HS/EHS, 100% for ECAPs); a family child care home (about 25%; 23.8% for HS/EHS, 46.7% for ECAPs); and public pre-kindergarten (about 4%). One-fourth of families received a subsidy for child care.

Survey data indicated that most programs appear to have good relationships with local child care programs. With respect to working with organizations at other levels (e.g., the Division of Social Services, Family Workplace Connection), about half of programs reported lesser or no working relationships.

Few difficulties or concerns were reported in activities related to child care. Aligning policies and practices with other service providers and sharing information about children who are jointly served were issues reported by about one-fourth of programs.

Head Start/Early Head Start: With the exception of aligning policies and practices with other service providers (two of four programs indicated difficulties; one of three indicated this was a concern), no difficulties were reported. One of two programs indicated sharing data on children who are jointly served and exchanging information on roles and resources with other organizations regarding child care and community needs assessment were concerns.

With respect to relationships with the different types of organizations asked about in this section, only one program reported ‘no working relationship’ (for Child Development Block Grant state committees).

ECAPs: Very few programs reported difficulties or concerns and for only a few of the activity areas in this section. Five programs reported ‘no working relationship’ for Child Development Block Grant state committees and two did so for Family Workplace Connection.

Family Literacy Services

The revised Head Start Act adds several provisions related to family literacy services. Coordination and collaboration with family literacy services and Reading Readiness programs is expected. Public and school libraries are specifically mentioned as possible partners regarding family literacy services. Optionally, programs can partner with institutions of higher education and non-profit organizations to provide college students with opportunities to serve as mentors or reading partners.

The HS Act revisions also address issues related to English language learners. Bilingual service providers are expected to be included in the needs assessment process. Outreach and information provision to parents of limited English proficient children, in an understandable format and in a language parents can understand, is an expectation. Programs are also expected to have procedures for identifying children who are limited English proficient and informing their parents about instructional services used to help their children make progress in increasing knowledge and skills and learning the English language.

PIRs do not include information related to family literacy except for the English as a second language issues. For just under one-third of families (32.7%; 34% for HS/EHS, 27% for ECAPs), the primary language spoken at home was not English. Among these families, Spanish was the most common language spoken (95%). Just over one-third (34.2%) of the families that had a different primary language appeared to have participated in an English as a Second Language training (36.3% for HS/EHS families, 24.7% for ECAP families).

Survey results indicate that for more than 40% of the organization types (e.g., DOE Title I, Part A Family Literacy; Adult Education; higher education programs, services, or resources related to family literacy), more than half of programs indicated ‘no working relationship’ or ‘cooperation.’

With respect to family literacy activities, few programs reported difficulties. Recruiting families to Family Literacy Services; establishing links/partnerships with key local level organizations/programs (other than libraries); educating others (e.g., parents, the community) about the importance of family literacy; establishing links/partnerships with key literacy providers; and incorporating family literacy into program policies and practices were noted as issues by about one-fourth of programs.

Head Start/Early Head Start: Three programs reported ‘no working relationship’ with DOE Title I, Part A Family Literacy and school libraries, and two did so for Reading Readiness programs. For all but one of the seven activities listed, at least one program reported difficulties. Establishing linkages/partnerships with key local level organizations/programs (other than libraries) was reported as difficult for two programs. Concerns reported were more prevalent, with two programs reporting such for educating others about the importance of family literacy; establishing linkages/partnerships with key local level organizations/programs (other than libraries); and exchanging information with other providers/organizations regarding roles and resources related to family literacy. The remaining four activities were indicated as a concern by one program.

ECAPs: Three programs reported ‘no working relationship’ with DOE Title I, Part A Family Literacy and higher education programs/services/resources related to family literacy. Few

difficulties were reported for the activities in this area. Slightly more concerns were reported with three programs indicating recruiting families to Family Literacy Services and exchanging information with other providers/organizations regarding roles and resources related to family literacy were a concern.

Services for Children With Disabilities

The revised Head Start Act includes a few changes related to services for children with disabilities. First, organizations that provide services to children with disabilities are expected to be included in program needs assessment and strategic planning processes. Second, programs are expected to have effective procedures for timely referral for children with disabilities to the state or local agency providing services under section 619 or Part C of IDEA and to collaborate with that agency. Finally, programs are expected to have effective procedures for providing necessary early intervening services to children with disabilities prior to the above agency making an eligibility determination.

PIR data indicate that about 10.8% of children enrolled in HS/EHS programs and ECAPs were determined to have a disability. All but a handful had IEPs or IFSPs and were eligible for IEP/IFSP related services. The most common disability diagnoses were non-categorical/developmental delay (40.5%) and speech or language impairments (28.2%). HS/EHS programs had formal agreements to coordinate services for children with disabilities with 18 of 19 Local Education Agencies (LEAs) or Part C in their service areas. ECAPs had such agreements with 13 of 14 LEAs.

Survey data reveal that more than half of programs reported ‘no working relationship’ or ‘cooperation’ with six types of agencies (e.g., other programs/services within the Department of Education; Birth to Three and university/college programs/services related to children with disabilities). For most activities, a sizeable minority of programs reported issues. Most can be grouped into two categories: 1) referrals and evaluations (e.g., receiving timely evaluations); and 2) coordinating with other organizations (e.g., coordinating with LEAs to provide special education services on-site). Accurately identifying children who are not developing like their peers and implementing effective instructional interventions prior to referral for evaluations were also issues reported for a small number of programs.

Head Start/Early Head Start: Three programs had ‘no working relationship’ with ‘State Education Agency – other programs/services (Section 504), special projects re: children with disabilities’ and two indicated so for university/community college programs/services related to children with disabilities. For most questions, programs noted few difficulties. Obtaining timely evaluations of children (two programs), and accurately identifying children who are not developing like peers and local districts/Part C providers acting on referrals (one program each) were the most frequently reported difficulties. More concerns than difficulties were noted. Implementing effective instructional interventions prior to referrals for evaluations, obtaining timely evaluations of children, local districts/Part C providers acting on referrals, coordinating with local education agencies to provide special education services at the Head Start site were reported as concerns by two programs each.

ECAPs: At least three programs reported ‘no working relationship’ with four types of organizations: university/community college programs/services related to children with disabilities (four programs); ‘State Education Agency – other programs/services (Section 504), special projects re: children with disabilities’; federally-funded programs for families of children with disabilities (e.g., Parent Information Center); and non-Head Start councils,

committees, or work groups that address policy/program issues regarding children with disabilities.

About one-third of ECAPs (three-four programs) reported difficulties in each of six activity areas: local districts/Part C providers acting on referrals, obtaining timely evaluations of children, coordinating services with Part C providers, coordinating with local education agencies to provide special education services at the Head Start site, sharing data/information on jointly served children, and exchanging information on roles and resources with other providers/organizations regarding services for children with disabilities and their families. Three to five programs reported concerns about these six activity areas and accurately identifying children who are not developing like peers, implementing effective instructional interventions prior to referrals for evaluations, and obtaining related services for eligible children with Part B/619 providers.

Community Services

The revised Head Start Act contains several provisions related to community services. First, a wide variety of community service providers are expected to be included in local needs assessment and strategic planning processes. Second, programs are expected to conduct outreach to such organizations (which include faith based organizations and businesses) to generate support for the program and to leverage resources. Finally, there is an expectation of increased collaboration and coordination with these organizations (which also include law enforcement, substance abuse and prevention organizations) to provide direct benefit to children and families enrolled in programs, but also to strengthen family and community environments to protect against the negative impacts of community risk factors.

PIR data indicate programs were successful in securing support from 3,855 volunteers (3,411 for HS/EHS programs, 444 for ECAPs), 70% of who were parents of current or prior children enrolled. Most families (94%) received family services. Among families that received such services, the most common were health education (76%), parenting education (73%), emergency/crisis intervention that addresses immediate needs for food, clothing, or shelter (44%), and adult education (35%).

Survey data indicate that few difficulties were reported for Emergency-Related Services, although more than half of programs reported 'no working relationship' or 'cooperation.' Similar patterns were evident for Prevention/Intervention Services and for other types of activities and relationships. Of greatest note, most programs indicated 'no working relationship' or 'cooperation' in working with organizations/services that provide parents with a link to their broader communities and with organizations and businesses that provide a source of volunteers with specific skills to train/support families. Almost half described this same relationship to organizations or businesses that provide training, education, or entry-level jobs for parents.

Head Start/Early Head Start: Very few difficulties were reported. Concerns were noted by two programs in obtaining in-kind services and in establishing links/partnerships with organizations or businesses that provide training, education, or entry-level jobs for parents. Linking with community emergency services providers and with organizations that can be source of skilled volunteers were noted as concerns by one program each. "No working relationship" was indicated by two programs for providers of emergency services (e.g., Red Cross) and organizations that provide volunteers; one program each reported similarly for community emergency service providers and organizations/services that provide parents with links to their broader communities. *Community Services:* Almost all families (94% of 2,132) received family

services. The most frequently provided were health education (75.8% of these who received services), parenting education (68.6%), 50.6% emergency/crisis services (food, clothing, shelter), and Adult Education (41.2%).

ECAPs: Few difficulties or concerns were reported. Three programs did indicate concern about linking with organizations that provide training, education or entry-level jobs for parents. Few programs reported “no working relationship” with the types of organizations listed in this section. *Community Services:* Almost all families (92.5% of about 600 families) received family services. The most frequently provided were parenting education (81.1% of those who received services) and health education (70.4%).

Partnering with Local School Districts for Head Start Transition and Alignment with K-12

The revised Head Start Act establishes substantial expectations for coordination and collaboration between programs and Local Education Agencies (LEAs). These expectations generally fall into three areas: 1) sharing resources (e.g., transportation, facilities) and pooling efforts to reduce duplication and enhance efficiency, while increasing program enrollment; 2) creating continuity in the curricular objectives and shared expectations for children’s learning and development; and 3) effectively preparing children, families, and schools for the transition to school so that children are ready to learn in the new environment.

According to PIR data, HS/EHS programs had formal agreements to coordinate transition for children and families with 18 of 19 local school districts in their service areas. ECAPs had such agreements with 12 of 16 school districts. Also, one HS/EHS program had a resource sharing agreement with a public pre-kindergarten program.

Survey data reveal five areas that were primary issues for about one-fourth to one half of programs: coordinating transportation and shared use of facilities with LEAs; organizing and participating in joint training, including transition-related training; ongoing communication with LEAs to facilitate coordination of programs; and coordinating with LEAs regarding other support services for children and families. Concerns were reported more frequently than difficulties, with at least three programs reporting concerns for all but three of the 16 activity items.

Head Start/Early Head Start: All four HS/EHS programs reported ‘coordination’ or better in their relationships with local school districts regarding transition from Head Start to Kindergarten. Since the additional sections of this topic area focused on transition to kindergarten, the lone Early Head Start-only program was exempt from the remaining questions, leaving three programs that responded to the difficulty and status questions.

At least one Head Start program indicated difficulty with 11 of the 16 activity items. All three programs indicated coordinating transportation with LEAs and coordinating shared use of facilities with LEAs were difficult. Two programs reported organizing and participating in joint training, including transition-related training for school staff and Head Start staff; ongoing communication with LEAs to facilitate coordination of programs; and coordinating with LEAs regarding other support services for children and families were difficult. Reported concerns were fewer, with three programs indicating ‘organizing and participating in joint training...’ was a concern, and two each reporting ‘ongoing communication...’ and ‘shared use of facilities...’ as concerns.

ECAPs: Eight of nine ECAP programs reported ‘coordination’ or better in their relationships with local school districts regarding transition from ECAP to Kindergarten. While

difficulties were reported for 13 of the 16 activity items, few difficulties (1-2) were evident for those items.

Concerns were reported for all 16 activity items, however, and concerns were more prevalent than difficulties. At least three programs reported concerns for eight items. Establishing and implementing comprehensive transition policies and procedures with LEAs was the most frequent concern. Coordination (of resources, policies, and some activities), communication, and language/literacy were themes common in the remaining seven most frequent areas of concern.

Professional Development

The revised Head Start Act sets increased requirements regarding professional development and credentials for Head Start/Early Head Start teachers and staff. Nationally, 50% of teachers are expected to have a Bachelors degree by October 1, 2013. Head Start teachers are also expected to participate in 15 clock hours of professional development each year. Additional educational opportunities may be needed to meet these requirements.

PIR data indicate that 27.6% of HS/EHS teachers had a Bachelor's degree or higher in Early Childhood Education or a related field. Just over one-third (33.8%) had an Associates degree (with 32.7% of the teachers enrolled in a college program that will lead to a Bachelors degree). Almost one-third (31.0%) had a CDA credential or state equivalent. The remaining 7.6% did not have a credential or degree, but were enrolled in some type of CDA or equivalent training. More than 10% of Assistant Teachers had a degree or credential; 39% of those without were pursuing training that will lead to a credential or a degree. All nine Home Visitors had a degree or credential.

For ECAP programs, more than half of 37 teachers (56.7%) had a Bachelors degree or higher in ECE or a related field. Nine (24.3%) had an Associates degree (one of this is pursuing a Bachelors degree) and 13.5% had a CDA or state equivalent. Of 43 Assistant Teachers, 41.3% had a degree or credential. Almost two-thirds of those without a degree or credential were pursuing training that would lead to one.

Survey data indicated that programs appear to have good working relationships with community colleges and vocational-technical schools, but less so with 4-year colleges and universities. On-line courses/programs, regional and state Training and Technical Assistance networks, and service providers/organizations offering relevant training/technical assistance had significant numbers of programs reporting 'no working relationship' or 'cooperation.'

Relatively few issues were noted in this area, with accessing scholarships and other financial support, accessing on-line opportunities, and the ability to access appropriate training content were the primary areas of note.

Head Start/Early Head Start: All programs had good relationships with institutions of higher education ('coordination' or higher). Three programs report 'no working relationship' or 'cooperation' with on-line courses/programs, the Head Start T & TA network, and other state and regional networks. Very few difficulties or concerns were noted related to professional development activities.

ECAPs: Six programs reported 'cooperation' or less for relationships with 4-year institutions of higher education; on-line courses/programs, and other T & TA networks. Four had such relationships with providers offering relevant training/TA cross-training opportunities.

Except for accessing scholarships and other financial support for professional development (five programs indicated difficulty; four concerns), few programs reported

difficulties. Four programs also reported concerns about accessing appropriate content to meet program needs. Three indicated that transferring credits between public institutions and accessing on-line opportunities were concerns.

Other Assessment Topics

Alignment of Program Curricula with State Standards and Outcomes

The revised Head Start Act sets expectations that programs will use research-based curricula that promote school readiness in a variety of domains, are aligned with the Head Start Child Outcomes Framework and state early learning standards, and are linked to assessment.

The *Delaware Early Learning Foundations* for preschoolers and the *Delaware Infant Toddler Early Learning Foundations* were developed as curriculum guides for all early childhood education programs in Delaware, including Head Start/Early Head Start programs and ECAPs. The *Foundations* documents are meant to provide structure and guidance for planning instructional experiences that are essential to facilitate children's development. All Delaware HS/EHS programs and ECAPs currently make use of these curriculum guides; therefore these programs are aligned with state learning standards. As individuals develop annual and short-term lesson plans for preschool-age children, the *Foundations* documents can be used to assist in the development of instructional activities. The skills listed in the documents are not intended to be used as a readiness checklist. Nor is it expected that every child entering kindergarten will be able to demonstrate each of the skills listed in the *Foundations* documents. It is hoped that early educators will use the *Foundations* and the information contained within, as they plan their daily, weekly, and year long classroom activities.

Early Learning Foundations for School Success (Delaware Department of Education, 2003) can be used as a guide by parents, preschool teachers, family child care providers, and others to guide the daily experiences they provide for preschool-aged children. The intent is to outline the types of learning experiences children ideally should have before they come to kindergarten. This document is organized by seven developmental domains: 1) Language Development; 2) Mathematics; 3) Science; 4) Creative Arts; 5) Emotional and Social Development; 6 Approaches to Learning; and 7) Physical Health and Development.

These domains correspond to domains included in the Head Start Child Outcomes Framework and also represent areas of development important for children's success. Under each domain are several developmental areas that further define important elements of the domain. Within each developmental area, the types of learning experiences children should have to promote success are outlined.

The Creative Curriculum® For Preschool and *The Creative Curriculum® Developmental Continuum for Ages 3-5* represent the mechanisms for implementing *Early Learning Foundations* principles in Head Start and ECAP classrooms that serve children ages three to five years. *The Creative Curriculum* is a comprehensive curriculum that guides teachers in designing a preschool program in which children learn important skills and content, and develop social competence. The Curriculum shows teachers how to set up a classroom and structure a day, what kinds of experiences to provide for children, how to work with children at different developmental levels, and how to involve families in the program. It shows how teachers guide learning in literacy, math, science, social studies, the arts, and technology while also supporting children's social/emotional development. Curriculum and assessment are linked with the use of *The Creative Curriculum Developmental Continuum* Assessment System.

The Developmental Continuum contains 10 goals and 50 objectives for children ages three to five years. Because children do not achieve an objective all at once, each objective is broken into three developmental steps showing the expected sequence of development for each objective. The developmental steps give teachers a way to determine each child’s current development in relation to each objective. This information also allows teachers to decide what specific support and kinds of experiences will enable each child to develop and learn.

In 2004, Teaching Strategies mapped *The Creative Curriculum for Preschool* and the goals and objectives of *The Creative Curriculum Developmental Continuum for Ages 3-5* against the Delaware *Early Learning Foundations for School Success*. This mapping process indicated full alignment was evident between the curriculum itself and the *Foundations* (Teaching Strategies, 2004). Examination of the *Curriculum’s* goals and objectives indicated that, except for the Creative Arts developmental domain, most learning experiences contained in the *Foundations* framework corresponded with at least one goal and objective from the *Creative Curriculum* (see Table 8). (For those interested in more details about the alignment of the *Foundations* with the *Creative Curriculum*, please see the References page for the web address of the alignment document).

Table 8: Alignment of Goals and Objectives of *The Creative Curriculum Developmental Continuum for Ages 3-5* with the Delaware *Early Learning Foundations for School Success*.

Delaware <i>Foundations</i> Developmental Domains	# of <i>Foundations</i> Learning Experiences that Map to <i>TCC</i> Goals and Objectives
Language Development	22/23
Mathematics	18/19
Science	11/13
Creative Arts	2/16
Emotional and Social Development	16/23
Approaches to Learning	11/11
Physical Health and Development	9/9

The *Delaware Infant and Toddler Early Learning Foundations* (Delaware Department of Education, January 2006) is a broad framework of outcomes for infants and toddlers focused on developmental expectations of children at three age points: infancy (0-9 months), early toddler (9-18 months), and late toddler (18-36 months). This document has two purposes. First, it provides a broad picture of what happens to children as they develop in several critical areas. Second, this document is intended to serve as a periodic check point for adults who are involved with young children to make sure appropriate activities are made available that support children’s growth and development. For those individuals in early care and education settings, the document can be used as a broad curricular guide for planning experiences for infants and toddlers.

Children’s abilities outlined in this document are divided into the domains of Language, Social and Emotional, Motor, and Cognitive. This was done to help the reader see the sequence of individual abilities as they develop and mature. This was also done to assist caregivers with understanding the broad array of abilities children develop as they move from infancy to becoming a toddler, to preschool. In dividing the skills by domain there is no intent that these skills would or should be taught individually. Instead, the division of skills is intended to assist

caregivers and educators with a framework for planning activities. The *Delaware Infant and Toddler Early Learning Foundations* has not yet been mapped to any other curriculum framework.

Assessment and ongoing monitoring is also another important aspect to a quality education system. Delaware has established an early childhood outcomes (accountability) system, Delaware Building BLOCKS (Delaware Department of Education, December 2006) The system is intended to: 1) be a process for the ongoing monitoring of children's development to support effective instruction; and 2) to serve as the statewide mechanism for reporting the Office of Special Education Program's (OSEP) outcome data. OSEP has established three functionally-stated outcomes upon which states must report. The outcomes are measured according to the extent to which children are making or not making progress as a result of receiving early intervention. The outcomes are:

- Children have positive social-emotional skills (including social relationships).
- Children acquire knowledge and skills (including early language/communication and early literacy).
- Children use appropriate behavior to meet their needs.

Migrant Population and Services

Migrant families present special challenges in Delaware (all information for this section was provided by the National Migrant & Seasonal Head Start Collaboration Office and drawn from "FY 2008-09 Community Assessment – Update: DE/MD-Telamon").

Based on the experience of Delaware's single Migrant Head Start program, relatively small numbers of migrant families come to Delaware and enroll in the statewide Migrant program. For example, in 2007, just 27 children residing in Delaware were enrolled in Migrant Head Start, down from the prior year.

Most migrant families travel from Florida, Texas, and Mexico to Kent and Sussex counties, Delaware's two counties with the most farmland. Very few have historically traveled to New Castle County, despite higher proportions of Hispanics/Latinos in that county's population. The children enrolled in 2007 appeared to be relatively geographically dispersed within the Kent and Sussex County area. Given that public transportation resources are very limited in southern Delaware, higher levels of transportation services were required to bring families and children to the program center.

Challenges in recruiting enough families and maintaining quality staffing for the short-term, 12 week Migrant program, and high transportation expenses led Delaware's Migrant Head Start grantee delegate to relinquish the grant in September, 2008. This creates an important gap in services for children from migrant families, as they tend to experience more needs in some key areas than the general population of children below the poverty line.

Most migrant families experience difficulties finding short-term affordable housing and often resort to substandard and/or crowded living arrangements. As a result, most of these families would meet various definitions of homelessness.

Health care issues also appear to be an area for concern. Asthma and obesity appear to be common medical issues and migrant children also appear to have unmet dental and mental health needs. Since Medicaid portability is not an option (many families maintain coverage at home and do not reside in Delaware long enough to get coverage) and potential issues around families' legal statuses means that many children do not receive all needed care.

Migrant families also appear to have fewer options for child care, given their lower income levels and their need for care for only part of each year (i.e., the state's growing season). Based on a survey of a small number of Kent County family child care homes by the Migrant program, there does appear to be a willingness to serve migrant children before; however, cost and bilingual capacity may limit real options for these families.

Conclusions

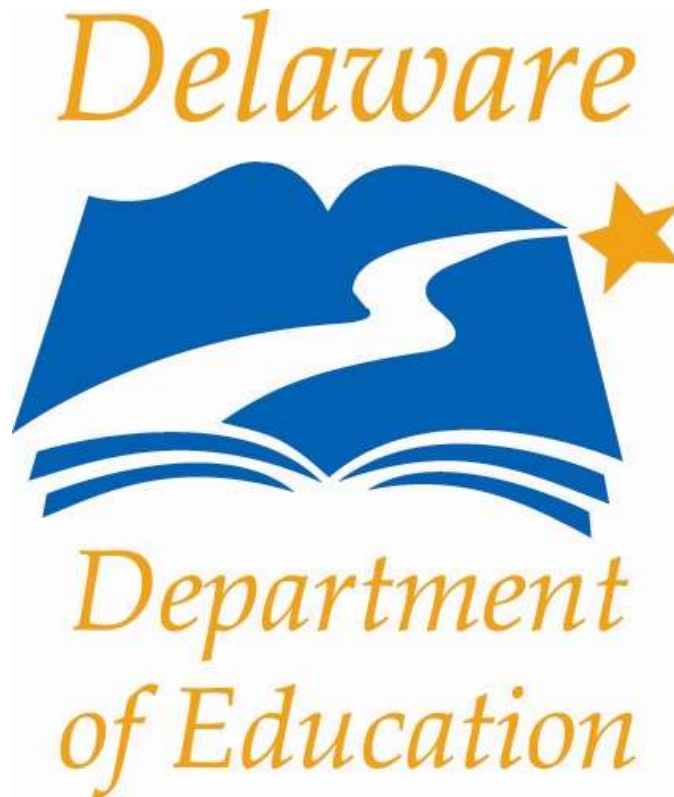
The findings in this report indicate that, overall, the collaboration support needs of Delaware's 13 Head Start/Early Head Start programs and Early Child Assistance Programs vary greatly by priority area. However, the greatest support needs result from changes in the amended Head Start Act that expanded the definition of 'full-day/full year.' This change impacts activities and relationships in a number of priority areas and will likely mean that programs will need to expand their partnerships/collaborations with other organizations in the community to meet the needs that result.

Another area where significant support may be needed relates to the *Professional Development* priority area. Programs appear to have good relationships with community colleges and Delaware has two significant new training resources that should be of great benefit to programs. However, more relationships need to be built with 4-year colleges to accommodate new Head Start Act requirements for teachers. Also, more professionals at all levels will need to pursue appropriate degrees of credentials.

Two additional priority areas, *Services for Children with Disabilities* and *Partnering with Local School Districts for Head Start Transition and Alignment with K-12*, appear to have needs that require both support for programs and systems-level interventions to help programs realize the changes the Head Start Act requires. Finally, the departure of Delaware's Migrant Head Start program will require new efforts to provide services to migrant families and children.

References

- American Academy of Family Physicians, American Academy of Pediatrics, American College of Physicians, & American Osteopathic Association (March 2007). *Joint Principles of the Patient-Centered Medical Home*. Available at <http://www.medicalhomeinfo.org/Joint%20Statement.pdf>.
- Cornwell, J. (2008). *2006-02007 Delaware Head Start/Early Childhood Assistance Program Outcomes Report*. Prepared for the Delaware Department of Education and the Interagency Resource Management Council. Available at: http://www.doe.k12.de.us/infosuites/students_family/earlychildhood/files/ECAP06%2007%20State%20Report.pdf
- Delaware Department of Education (March, 2003). *DELAWARE Early Learning Foundations for School Success*. Available at http://www.doe.k12.de.us/infosuites/students_family/earlychildhood/files/Early%20Learning%20Foundations%20Revised.pdf.
- Delaware Department of Education (January, 2006). *DELAWARE Infant and Toddler Early Learning Foundations: A Curriculum Framework*. Available at http://www.doe.k12.de.us/infosuites/students_family/earlychildhood/files/earlychildhood_infant-toddler.pdf.
- Delaware Department of Education (December 2006). Delaware Building Blocks: Early Childhood Monitoring – Instruction – Accountability System For Young Children. Available at www.doe.k12.de.us/early_childhood/programs/gseg/buildingblocks.
- Delaware Early Care and Education Council (2006). *Early Success, Creating a Quality Early Care and Education System for Delaware's Children*. Available at http://www.doe.state.de.us/ddoe/files/pdf/DECEC_Annual06.pdf.
- Delaware Office of Child Care Licensing website (<http://kids.delaware.gov/occl/occl.shtml>). February 2009.
- Delaware Office of Child Care Licensing (April 2009). Personal communication.
- Gamel-McCormick, Buell, M.J., Amsden, D.J., & Fahey, M. (May 2003). *Delaware Early Care and Education Baseline Quality Study*. Prepared for the Delaware Interagency Resource Management Committee and the Department of Education, Department of Health and Social Services, and the Department of Services for Children, Youth and their Families. Available from Center for Disabilities Studies, Newark, DE.
- National Survey of Children with Special Health Care Needs 2005/2006. Data accessed January 2009 from <http://www.cshcndata.org/Content/Default.aspx>.
- Teaching Strategies (2004) *Alignment of the Delaware Early Learning Foundations for School Success With The Creative Curriculum® For Preschool and the Goals and Objectives of The Creative Curriculum® Developmental Continuum for Ages 3.5*. Available at http://www.teachingstrategies.com/content/pageDocs/Delaware_Alignment.pdf.
- Telamon (2008). FY 2008-09 Community Assessment – Update: DE/MD-Telamon. Provided by the National Migrant & Seasonal Head Start Collaboration Office.
- U.S. Census Bureau (January 2009). 2007 American Community Survey data. Accessed at http://factfinder.census.gov/home/saff/main.html?_lang=en.
- Yannetta, K.A., Amsden, D.J., & Buell, M.J. (November 2007) *Delaware Early Care and Education Workforce Study Report*. Prepared by and available from the Center for Disabilities Studies, Newark, DE.



For information about the Head Start Collaboration Office, please contact:

April Hill-Addison - Director
Head Start Collaboration Office
Delaware Department of Education – Office of Early Childhood
Townsend Building
401 Federal Street, Suite #2
Dover, DE 19901
302-735-4210
Email: aaddison@doe.k12.de.us

The State of Delaware is an equal opportunity employer and does not discriminate or deny services on the basis of race, color, religion, national origin, sex disability and/or age.